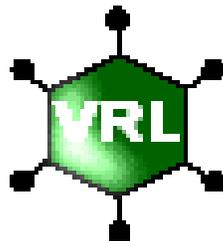


Summary Report of Influenza Season 2000/2001



Report produced: 27/06/2001

Influenza activity in Ireland

GP consultations for influenza-like illness (ILI) were reported on a weekly basis per 100,000 population from week 40, 2000 to week 20, 2001 (figure 1). Peak incidence occurred during week 8 and coincided with an increase in influenza B. The consultation rate for week 8 was 121 per 100,000 population. A second smaller peak occurred during week 11, with a consultation rate of 109 per 100,000. From week 13, the GP consultation rate decreased steadily until week 20, when the consultation rate reached zero. The peak age specific consultation rate* was in the 15-44 year age group (figure 2). Fifty-one percent of GP consultations for ILI were male and forty-nine percent were female.

Figure 1: GP consultation rate for ILI per 100,000 population by report week

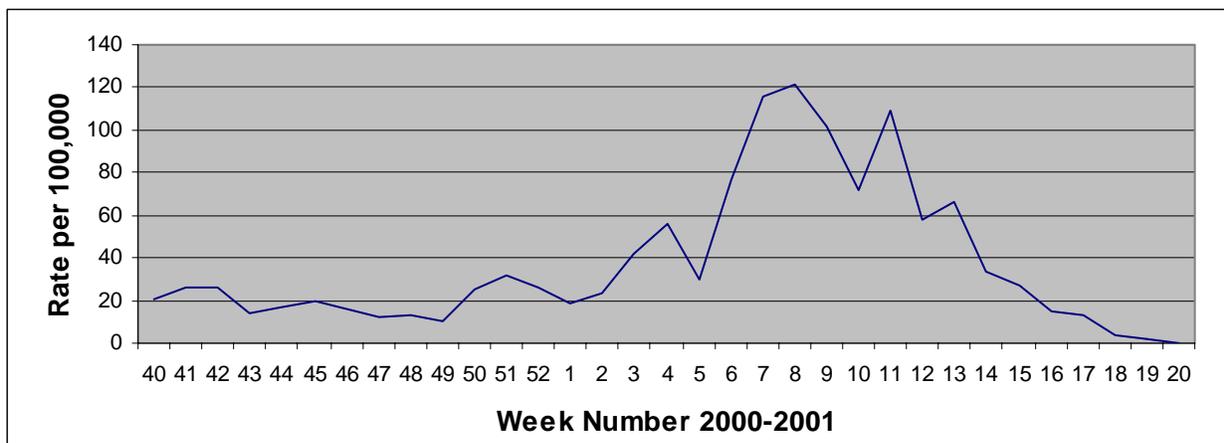
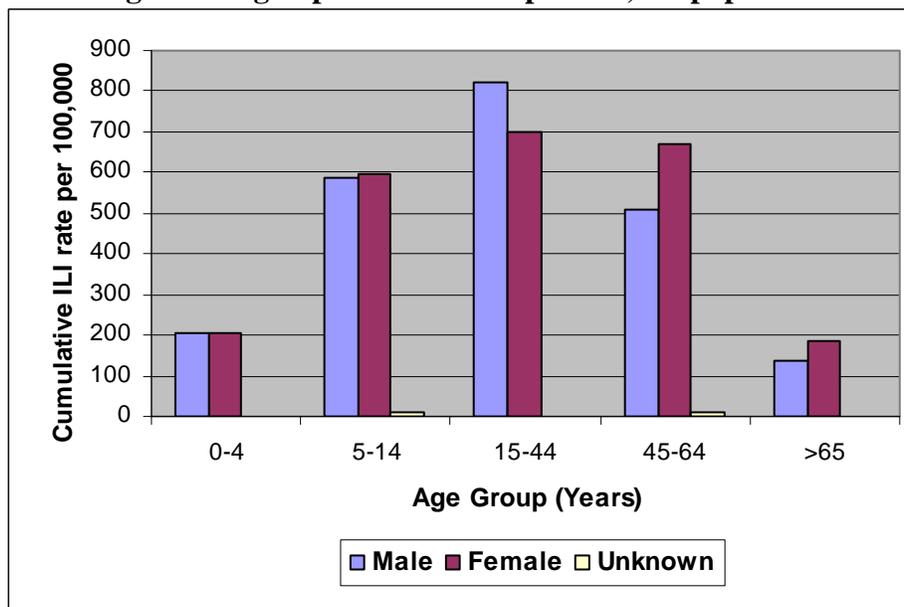


Figure 2: Age-specific ILI rate per 100,000 population*

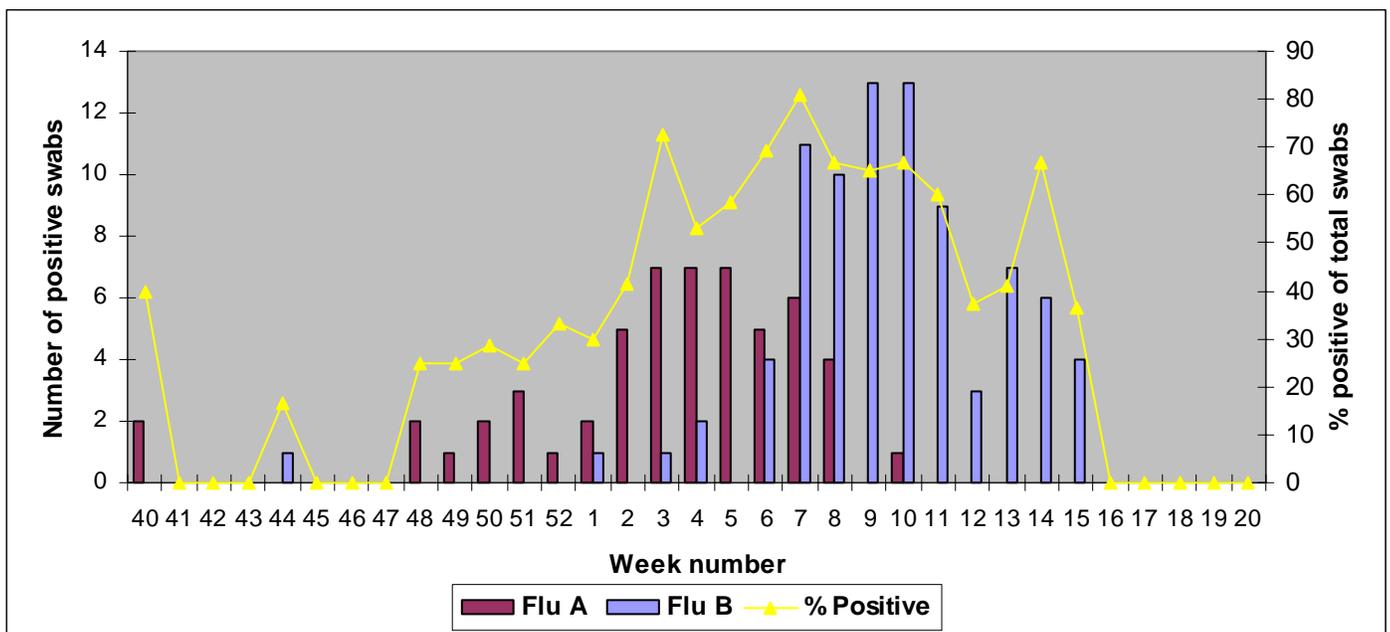


*The denominator used in the age specific consultation rate is from the 1996 census data; this assumes that the age distribution of the sentinel general practices is similar to the national age distribution; this has not been validated.

Virological data

The Virus Reference Laboratory (VRL) received 329 swabs from sentinel general practices over the 2000/2001 influenza season. Of the 329 swabs received, 140 (42.6%) were positive for influenza virus. The highest number of positive samples occurred during the period of peak clinical activity. Influenza A accounted for 39.3% (55) of positive swabs; 35% (49) were influenza A (H1N1), 2.9% (4) were influenza A (H3N2), and 1.4% (2) were untyped influenza A. Influenza B accounted for 60.7% (85) of the positive swabs. Influenza A was the predominant strain from week 40, 2000 until week 6, 2001, after which influenza B predominated until week 15, 2000. No swabs were positive for influenza virus after week 15. The highest number of positive swabs was in the 15 to 44 year age group. Of the 140 positive swabs, 52.1% (73) were male, 47.1% (66) were female, and 0.7% (1) was of unknown sex.

Figure 3: Number of positive swabs by flu type and % positive of total swabs by week.



The VRL referred 4 influenza A (H1N1) virus isolates to the World Health Organisation Laboratory in London for antigenic characterisation. Three samples were identified as being antigenically similar to the current vaccine strain A/New Caledonia 20/99. The other isolate was closely related to an older H1N1 strain, A/Bayern/07/95. Although A/Bayern-like viruses are antigenically distinct from the A/New Caledonia-like viruses, the A/New Caledonia/20/99 vaccine strain produces high titres of antibody that cross-react with A/Bayern/07/95-like viruses. Both of these H1 isolates were identified in other European countries as well as in the United States this season.

Influenza activity Worldwide

Influenza activity was generally mild throughout the 2000/2001 influenza season. In the United States, influenza A (H1N1) predominated throughout the season. This was the first season that influenza A (H3N2) did not predominate in the US since the 1995/1996 influenza season. Influenza activity peaked during late January and early February. In Canada influenza B predominated during this season. In Europe, influenza A (H1N1) activity was reported until the end of February, after which influenza B became the predominant circulating strain in most European countries. Influenza C was reported from France (for the first time since 1981) during week 9, 2001. Sporadic reports of influenza A (H3N2) from Spain occurred during week 10, 2001. In England, Scotland and Wales levels of influenza activity and other respiratory illness remained low this season. GP consultations for influenza and flu-like illness peaked in February, but remained at the lower end of the range for normal seasonal activity before quickly declining. Influenza activity was initially associated with influenza A (H1N1), as with most of Europe. Influenza B became the predominant circulating strain as the season progressed. In Hong Kong, influenza A (H5N1) was recently detected in poultry markets, this has resulted in the slaughter of over one million poultry. No human cases of H5N1 virus have been detected during this outbreak.

Weekly Influenza Reports will resume again in October 2001 for the 2001/2002 influenza season. Many thanks are due to all those who provided data during the 2000/2001 influenza season.